

Fill in this information to identify the case:

Debtor name Catalyst Prep LLC

United States Bankruptcy Court for the:
Western District of Texas, Austin Division

Case number (if known): 19-11236

☐ Check if this is an
amended filing

Official Form 202

Declaration Under Penalty of Perjury for Non-Individual Debtors

12/15

An individual who is authorized to act on behalf of a non-individual debtor, such as a corporation or partnership, must sign and submit this form for the schedules of assets and liabilities, any other document that requires a declaration that is not included in the document, and any amendments of those documents. This form must state the individual's position or relationship to the debtor, the identity of the document, and the date. Bankruptcy Rules 1008 and 9011.

WARNING – Bankruptcy fraud is a serious crime. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$500,000 or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

Declaration and signature

I am the president, another officer, or an authorized agent of the corporation; a member or an authorized agent of the partnership; or another individual serving as a representative of the debtor in this case.

I have examined the information in the documents checked below and I have a reasonable belief that the information is true and correct:

- ☒ *Schedule A/B: Assets—Real and Personal Property* (Official Form 206A/B)
- ☒ *Schedule D: Creditors Who Have Claims Secured by Property* (Official Form 206D)
- ☒ *Schedule E/F: Creditors Who Have Unsecured Claims* (Official Form 206E/F)
- ☒ *Schedule G: Executory Contracts and Unexpired Leases* (Official Form 206G)
- ☒ *Schedule H: Codebtors* (Official Form 206H)
- ☒ *A Summary of Assets and Liabilities for Non-Individuals* (Official Form 206A-Summary)
- ☐ *Amended Schedule* _____
- ☐ *Chapter 11 or Chapter 9 Cases: List of Creditors Who Have the 20 Largest Unsecured Claims and Are Not Insiders* (Official Form 204)
- ☐ Other document that requires a declaration _____

I declare under penalty of perjury that the foregoing is true and correct.

Executed on 10/25/2019
MM/ DD/ YYYY

X

/s/ Jared Friedland

Signature of individual signing on behalf of debtor

Jared Friedland
Printed name

CEO
Position or relationship to debtor

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Official Form 206A/B

Schedule A/B: Assets — Real and Personal Property

12/15

Disclose all property, real and personal, which the debtor owns or in which the debtor has any other legal, equitable, or future interest. Include all property in which the debtor holds rights and powers exercisable for the debtor's own benefit. Also include assets and properties which have no book value, such as fully depreciated assets or assets that were not capitalized. In Schedule A/B, list any executory contracts or unexpired leases. Also list them on *Schedule G: Executory Contracts and Unexpired Leases* (Official Form 206G).

Be as complete and accurate as possible. If more space is needed, attach a separate sheet to this form. At the top of any pages added, write the debtor's name and case number (if known). Also identify the form and line number to which the additional information applies. If an additional sheet is attached, include the amounts from the attachment in the total for the pertinent part.

For Part 1 through Part 11, list each asset under the appropriate category or attach separate supporting schedules, such as a fixed asset schedule or depreciation schedule, that gives the details for each asset in a particular category. List each asset only once. In valuing the debtor's interest, do not deduct the value of secured claims. See the instructions to understand the terms used in this form.

Part 1: Cash and cash equivalents

1. Does the debtor have any cash or cash equivalents?

- ☐ No. Go to Part 2.
☒ Yes. Fill in the information below.

All cash or cash equivalents owned or controlled by the debtor

Current value of debtor's
interest

2. Cash on hand

3. Checking, savings, money market, or financial brokerage accounts (Identify all)

Name of institution (bank or brokerage firm)	Type of account	Last 4 digits of account number	
3.1 Chase	Checking account	5019	\$0.00

4. Other cash equivalents (Identify all)

None

5. Total of Part 1

Add lines 2 through 4 (including amounts on any additional sheets). Copy the total to line 80.

\$0.00

Part 2: Deposits and prepayments

6. Does the debtor have any deposits or prepayments?

- ☐ No. Go to Part 3.
☒ Yes. Fill in the information below.

Current value of debtor's
interest

7. Deposits, including security deposits and utility deposits

Description, including name of holder of deposit

7.1 Ogle Properties LLC	\$5,500.00
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8. Prepayments, including prepayments on executory contracts, leases, insurance, taxes, and rent

Description, including name of holder of prepayment

None

9. Total of Part 2

Add lines 7 through 8 (including amounts on any additional sheets). Copy the total to line 81.

\$5,500.00

Part 3: Accounts receivable

10. Does the debtor have any accounts receivable?

☒ No. Go to Part 4.

☐ Yes. Fill in the information below.

Current value of debtor's
interest

11. Accounts Receivable

11a. 90 days old or less: \$0.00 - \$0.00 = → \$0.00
face amount doubtful or uncollectible accounts

11b. Over 90 days old: \$0.00 - \$0.00 = → \$0.00
face amount doubtful or uncollectible accounts

12. Total of Part 3

Current value on lines 11a + 11b = line 12. Copy the total to line 82.

Part 4: Investments

13. Does the debtor own any investments?

☒ No. Go to Part 5.

☐ Yes. Fill in the information below.

Valuation method used for
current value

Current value of debtor's
interest

14. Mutual funds or publicly traded stocks not included in Part 1

Name of fund or stock:

None

15. Non-publicly traded stock and interests in incorporated and unincorporated businesses, including any interest in an LLC, partnership, or joint venture

Name of fund or stock: % of ownership:

None

16. Government bonds, corporate bonds, and other negotiable and non-negotiable instruments not included in Part 1

Describe:

None

17. Total of Part 4

Add lines 14 through 16 (including any additional sheets). Copy the total to line 83.

Part 5: Inventory, excluding agriculture assets

18. Does the debtor own any inventory (excluding agriculture assets)?

- ☒ No. Go to Part 6.
☐ Yes. Fill in the information below.

General description	Date of the last physical inventory	Net book value of debtor's interest (Where available)	Valuation method used for current value	Current value of debtor's interest
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19. Raw materials

None

20. Work in progress

None

21. Finished goods, including goods held for resale

None

22. Other inventory or supplies

None

23. Total of Part 5

Add lines 19 through 22 (including any additional sheets). Copy the total to line 84.

24. Is any of the property listed in Part 5 perishable?

- ☒ No
☐ Yes

25. Has any of the property listed in Part 5 been purchased within 20 days before the bankruptcy was filed?

- ☒ No
☐ Yes

26. Has any of the property listed in Part 5 been appraised by a professional within the last year?

- ☒ No
☐ Yes

Part 6: Farming and fishing-related assets (other than titled motor vehicles and land)

27. Does the debtor own or lease any farming and fishing-related assets (other than titled motor vehicles and land)?

- ☒ No. Go to Part 7.
☐ Yes. Fill in the information below.

General description	Net book value of debtor's interest (Where available)	Valuation method used for current value	Current value of debtor's interest
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28. Crops — either planted or harvested

None

29. Farm animals *Examples:* Livestock, poultry, farm-raised fish

None

30. Farm machinery and equipment (Other than titled motor vehicles)

None

31. Farm and fishing supplies, chemicals, and feed

None

32. Other farming and fishing-related property not already listed in Part 6

None

33. Total of Part 6

Add lines 28 through 32. Copy the total to line 85.

34. Is the debtor a member of an agricultural cooperative?

☒ No

☐ Yes. Is any of the debtor's property stored at the cooperative?

☐ No

☐ Yes

35. Has any of the property listed in Part 6 been purchased within 20 days before the bankruptcy was filed?

☒ No

☐ Yes

36. Is a depreciation schedule available for any of the property listed in Part 6?

☒ No

☐ Yes

37. Has any of the property listed in Part 6 been appraised by a professional within the last year?

☒ No

☐ Yes

Part 7: Office furniture, fixtures, and equipment; and collectibles

38. Does the debtor own or lease any office furniture, fixtures, equipment, or collectibles?

☒ No. Go to Part 8.

☐ Yes. Fill in the information below.

General description	Net book value of debtor's interest (Where available)	Valuation method used for current value	Current value of debtor's interest
39. Office furniture			
None			
40. Office fixtures			
None			
41. Office equipment, including all computer equipment and communication systems equipment and software			
None			
42. Collectibles <i>Examples:</i> Antiques and figurines; paintings, prints or other artwork; books, pictures, or other art objects; china and crystal; stamp, coin, or baseball card collections; other collections, memorabilia, or collectibles			
None			
43. Total of Part 7 Add lines 39 through 42. Copy the total to line 86.			
44. Is a depreciation schedule available for any of the property listed in Part 7? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes			
45. Has any of the property listed in Part 7 been appraised by a professional within the last year? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes			
Part 8: Machinery, equipment, and vehicles			
46. Does the debtor own or lease any machinery, equipment, or vehicles? <input checked="" type="checkbox"/> No. Go to Part 9. <input type="checkbox"/> Yes. Fill in the information below.			
General description Include year, make, model, and identification numbers (i.e., VIN, HIN, or N-number)	Net book value of debtor's interest (Where available)	Valuation method used for current value	Current value of debtor's interest
47. Automobiles, vans, trucks, motorcycles, trailers, and titled farm vehicles			
None			
48. Watercraft, trailers, motors, and related accessories <i>Examples:</i> Boats, trailers, motors, floating homes, personal watercraft, and fishing vessels			

None

49. Aircraft and accessories

None

50. Other machinery, fixtures, and equipment (excluding farm machinery and equipment)

None

51. Total of Part 8

Add lines 47 through 50. Copy the total to line 87.

52. Is a depreciation schedule available for any of the property listed in Part 8?

- ☒ No
☐ Yes

53. Has any of the property listed in Part 8 been appraised by a professional within the last year?

- ☒ No
☐ Yes

Part 9: Real Property

54. Does the debtor own or lease any real property?

- ☒ No. Go to Part 10.
☐ Yes. Fill in the information below.

General description

Include street address or other description such as Assessor Parcel Number (APN), and type of property (for example, acreage, factory, warehouse, apartment or office building), if available

Nature and extent of debtor's interest in property

Net book value of debtor's interest
(Where available)

Valuation method used for current value

Current value of debtor's interest

55. Any building, other improved real estate, or land which the debtor owns or in which the debtor has interest

None

56. Total of Part 9

Add the current value on lines 55.1 through 55.3 and entries from any addition sheets. Copy the total to line 88.

57. Is a depreciation schedule available for any of the property listed in Part 9?

- ☒ No
☐ Yes

58. Has any of the property listed in Part 9 been appraised by a professional within the last year?

- ☒ No
☐ Yes

Part 10: Intangibles and Intellectual Property

Debtor Catalyst Prep LLC
Name

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59. Does the debtor have any interests in intangibles or intellectual property?

- ☐ No. Go to Part 11.
☒ Yes. Fill in the information below.

General description	Net book value of debtor's interest (Where available)	Valuation method used for current value	Current value of debtor's interest
---------------------	--	---	------------------------------------

60. Patents, copyrights, trademarks, and trade secrets

None

61. Internet domain names and websites

None

62. Licenses, franchises, and royalties

None

63. Customer lists, mailing lists, or other compilations

None

64. Other intangibles, or intellectual property

64.1 Company IP (Unknown) (Unknown)

65. Goodwill

None

66. Total of Part 10

Add lines 60 through 65. Copy the total to line 89.

\$0.00

67. Do your lists or records include personally identifiable information of customers? (as defined in 11 U.S.C. §§ 101(41A) and 107)

- ☒ No
☐ Yes

68. Is there an amortization or other similar schedule available for any of the property listed in Part 10?

- ☒ No
☐ Yes

69. Has any of the property listed in Part 10 been appraised by a professional within the last year?

- ☐ No
☒ Yes

Part 11: All other assets

70. Does the debtor own any other assets that have not yet been reported on this form?

- ☐ No. Go to Part 12.
☒ Yes. Fill in the information below.

Debtor Catalyst Prep LLC
Name

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Current value of debtor's
interest

71. Notes receivable

Description (include name of obligor)

None

72. Tax refunds and unused net operating losses (NOLs)

Description (for example, federal, state, local)

None

73. Interests in insurance policies or annuities

None

74. Causes of action against third parties (whether or not a lawsuit has been filed)

74.1 Claim against Chase Bank

\$5,000,000.00

Nature of Claim

Amount Requested \$5,000,000.00

75. Other contingent and unliquidated claims or causes of action of every nature, including counterclaims of the debtor and rights to set off claims

None

76. Trusts, equitable or future interests in property

None

77. Other property of any kind not already listed *Examples: Season tickets, country club membership*

None

78. Total of Part 11

Add lines 71 through 77. Copy the total to line 90.

\$5,000,000.00

79. Has any of the property listed in Part 11 been appraised by a professional within the last year?

☒ No

☐ Yes

Debtor Catalyst Prep LLC
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Part 12: Summary

Type of property	Current value of personal property	Current value of real property
80. Cash, cash equivalents, and financial assets. <i>Copy line 5, Part 1.</i>	<u>\$0.00</u>	
81. Deposits and prepayments. <i>Copy line 9, Part 2.</i>	<u>\$5,500.00</u>	
82. Accounts receivable. <i>Copy line 12, Part 3.</i>	_____	
83. Investments. <i>Copy line 17, Part 4.</i>	_____	
84. Inventory. <i>Copy line 23, Part 5.</i>	_____	
85. Farming and fishing-related assets. <i>Copy line 33, Part 6.</i>	_____	
86. Office furniture, fixtures, and equipment; collectibles. <i>Copy line 43, Part 7.</i>	_____	
87. Machinery, equipment, and vehicles. <i>Copy line 51, Part 8.</i>	_____	
88. Real property. <i>Copy line 56, Part 9.....</i>		→ <div><u> </u></div>
89. Intangibles and intellectual property. <i>Copy line 66, Part 10.</i>	<u>\$0.00</u>	
90. All other assets. <i>Copy line 78, Part 11.</i>	+ <u>\$5,000,000.00</u>	
91. Total. Add lines 80 through 90 for each column.....	91a. <div><u>\$5,005,500.00</u></div>	+ 91b. <div><u>\$0.00</u></div>
92. Total of all property on Schedule A/B. Lines 91a + 91b = 92		<div><u>\$5,005,500.00</u></div>

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Official Form 206D

Schedule D: Creditors Who Have Claims Secured by Property

12/15

Be as complete and accurate as possible.

1. Do any creditors have claims secured by debtor's property?

- ☐ No. Check this box and submit page 1 of this form to the court with debtor's other schedules. Debtor has nothing else to report on this form.
- ☒ Yes. Fill in all of the information below.

Part 1: List Creditors Who Have Secured Claims

2. List in alphabetical order all creditors who have secured claims. If a creditor has more than one secured claim, list the creditor separately for each claim.

Column A

Amount of claim
Do not deduct the value of collateral.

Column B

Value of collateral that supports this claim

2.1 Creditor's name

Ogle Properties

Describe debtor's property that is subject to a lien

Ogle Properties LLC

\$9,000.00

\$5,500.00

Creditor's mailing address

Cheryl Ogle

3600 Bee Caves Rd #206

Austin, TX 78746

Creditor's email address, if known

cheryl@ogle-properties.com

Describe the lien

Is the creditor an insider or related party?

☒ No

☐ Yes.

Is anyone else liable on this claim?

☒ No

☐ Yes. Fill out *Schedule H: Codebtors* (Official Form 206H).

Date debt was incurred

Last 4 digits of account number

As of the petition filing date, the claim is:

Check all that apply.

☐ Contingent

☐ Unliquidated

☒ Disputed

Do multiple creditors have an interest in the same property?

☒ No.

☐ Yes. Specify each creditor, including this creditor, and its relative priority.

Remarks: Office Lease - claiming we owe funds for wear and tear, etc.

3. Total of the dollar amounts from Part 1, Column A, including the amounts from the Additional Page, if any.

\$9,000.00

Debtor Catalyst Prep LLC
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Part 2: List Others to Be Notified for a Debt Already Listed in Part 1

List in alphabetical order any others who must be notified for a debt already listed in Part 1. Examples of entities that may be listed are collection agencies, assignees of claims listed above, and attorneys for secured creditors.

If no others need to be notified for the debts listed in Part 1, do not fill out or submit this page. If additional pages are needed, copy this page.

Name and address	On which line in Part 1 did you enter the related creditor?	Last 4 digits of account number for this entity
<div></div>	Line <div></div>	<div></div> <div></div> <div></div> <div></div>
<div></div>		
<div></div>		

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United States Bankruptcy Court for the:
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☐ Check if this is an
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Official Form 206E/F

Schedule E/F: Creditors Who Have Unsecured Claims

12/15

Be as complete and accurate as possible. Use Part 1 for creditors with PRIORITY unsecured claims and Part 2 for creditors with NONPRIORITY unsecured claims. List the other party to any executory contracts or unexpired leases that could result in a claim. Also list executory contracts on *Schedule A/B: Assets - Real and Personal Property* (Official Form 206A/B) and on *Schedule G: Executory Contracts and Unexpired Leases* (Official Form 206G). Number the entries in Parts 1 and 2 in the boxes on the left. If more space is needed for Part 1 or Part 2, fill out and attach the Additional Page of that Part included in this form.

Part 1: List All Creditors with PRIORITY Unsecured Claims

1. Do any creditors have priority unsecured claims? (See 11 U.S.C. § 507)

- ☐ No. Go to Part 2.
☒ Yes. Go to line 2.

2. List in alphabetical order all creditors who have unsecured claims that are entitled to priority in whole or in part. If the debtor has more than 3 creditors with priority unsecured claims, fill out and attach the Additional Page of Part 1.

2.1 Priority creditor's name and mailing address

Atkins, James

As of the petition filing date, the claim is:

Check all that apply.

- ☐ Contingent
☐ Unliquidated
☐ Disputed

Basis for the Claim:

Date or dates debt was incurred

Last 4 digits of account
number

Is the claim subject to offset?

- ☒ No
☐ Yes

Specify Code subsection of PRIORITY unsecured
claim: 11 U.S.C. § 507(a) (4)

Remarks: Former Catalyst full-time employee. Owe
him commission check.

Total claim

\$1,852.77

Priority amount

unknown

2.2 Priority creditor's name and mailing address

Bachman, Debra

As of the petition filing date, the claim is:

Check all that apply.

- ☐ Contingent
☐ Unliquidated
☐ Disputed

Basis for the Claim:

Date or dates debt was incurred

Last 4 digits of account
number

Is the claim subject to offset?

- ☒ No
☐ Yes

Specify Code subsection of PRIORITY unsecured
claim: 11 U.S.C. § 507(a) (4)

Remarks: Former Catalyst full-time employee. Owe
her reimbursement check for mileage. Not taxable
income.

Total claim

\$1,585.00

Priority amount

unknown

Debtor Catalyst Prep LLC
Name _____

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Part 1: Additional Page

2.3 Priority creditor's name and mailing address <u>Fielder, Risa</u> <u>3908 Yarborough Ave</u> <u>Austin, TX 78744</u> Date or dates debt was incurred _____ Last 4 digits of account number ____ _ Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) <u>(4)</u>	As of the petition filing date, the claim is: <u>\$2,000.00</u> <u>\$2,000.00</u> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the Claim: <u>Wages/commission</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
2.4 Priority creditor's name and mailing address <u>Franchise Tax Board (CA)</u> <u>9646 Butterfield Way</u> <u>Sacramento, CA 95827</u> Date or dates debt was incurred _____ Last 4 digits of account number ____ _ Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) ____ Remarks: FTB LLC fees	As of the petition filing date, the claim is: <u>\$800.00</u> <u>unknown</u> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the Claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
2.5 Priority creditor's name and mailing address <u>Jackson, Christopher</u> _____ _____ Date or dates debt was incurred _____ Last 4 digits of account number ____ _ Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) <u>(4)</u>	As of the petition filing date, the claim is: <u>\$3,635.90</u> <u>unknown</u> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the Claim: <u>Wages/Commission</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes

Debtor Catalyst Prep LLC
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Part 1: Additional Page

2.6	Priority creditor's name and mailing address <u>Rodriguez, Jose</u> _____ _____ _____ Date or dates debt was incurred _____ Last 4 digits of account number _____ Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (4) Remarks: Former Catalyst full-time employee. Owe him reimbursement check for mileage. Not taxable income.	As of the petition filing date, the claim is: <u>\$1,290.00</u> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the Claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<u>unknown</u>
2.7	Priority creditor's name and mailing address <u>Stevenson, Tim</u> _____ <u>904 Breckenridge Ct</u> _____ <u>Piscataway, NJ 08854</u> _____ Date or dates debt was incurred _____ Last 4 digits of account number _____ Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (4) Remarks: Former Catalyst full-time employee. Owe him reimbursement check for mileage. Not taxable income.	As of the petition filing date, the claim is: <u>\$996.00</u> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the Claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<u>unknown</u>
2.8	Priority creditor's name and mailing address <u>Tew, Jennifer</u> _____ _____ _____ Date or dates debt was incurred _____ Last 4 digits of account number _____ Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (4) Remarks: Former Catalyst full-time employee. Owe her reimbursement check for mileage. Not taxable income.	As of the petition filing date, the claim is: <u>\$111.00</u> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the Claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<u>unknown</u>

Debtor Catalyst Prep LLC
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Part 1: Additional Page

2.9	Priority creditor's name and mailing address <u>Tibke, Erin</u> <u>280 Belmore Ave #34</u> <u>East Islip, NY 11730</u> Date or dates debt was incurred _____ Last 4 digits of account number ____ _ Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (4) Remarks: Catalyst full-time employee. Owe her reimbursement check for mileage. Not taxable income.	As of the petition filing date, the claim is: <u>\$1,477.00</u> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the Claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<u>unknown</u>
2.10	Priority creditor's name and mailing address <u>Yeagle, Jeff</u> _____ _____ Date or dates debt was incurred _____ Last 4 digits of account number ____ _ Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (4) Remarks: Former Catalyst full-time employee. Owe him commission check.	As of the petition filing date, the claim is: <u>\$2,000.00</u> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the Claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<u>unknown</u>

Debtor Catalyst Prep LLC
Name _____

Case number (if known) 19-11236

Part 2: List All Creditors with NONPRIORITY Unsecured Claims

3. List in alphabetical order all of the creditors with nonpriority unsecured claims. If the debtor has more than 6 creditors with nonpriority unsecured claims, fill out and attach the Additional Page of Part 2.

			Amount of claim
3.1	Nonpriority creditor's name and mailing address <u>319 North Preston St</u> <u>319 North Preston St 1F</u> <u>Philadelphia, PA 19104</u> Date or dates debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<u>\$2,134.95</u>
3.2	Nonpriority creditor's name and mailing address <u>8x8</u> Date or dates debt was incurred _____ Last 4 digits of account number _____ <u>Remarks: VOIP phone system</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<u>unknown</u>
3.3	Nonpriority creditor's name and mailing address <u>Accountability Resources</u> <u>6300 Bridge Point Parkway #250</u> <u>Austin, TX 78730</u> Date or dates debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<u>\$3,772.24</u>
3.4	Nonpriority creditor's name and mailing address <u>Aerotek</u> <u>901 S. Mopac Expy Building 3 Suite 300</u> <u>Austin, TX 78746</u> Date or dates debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<u>\$20,937.31</u>
3.5	Nonpriority creditor's name and mailing address <u>Alexander Charles</u> <u>c/o Bryan Schwartz Law</u> <u>180 Grand Ave Ste 1380</u> <u>Oakland, CA 94612-3750</u> Date or dates debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<u>unknown</u>

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3.6	Nonpriority creditor's name and mailing address <u>AMEX</u> _____ _____ _____ Date or dates debt was incurred _____ Last 4 digits of account number <u>4 7 2 3</u> Remarks: Account #: 3573704723. Merchant services. (NOT an AMEX credit card. I owe AMEX merchant services.)	As of the petition filing date, the claim is: <u>unknown</u> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.7	Nonpriority creditor's name and mailing address <u>Anderson, Asa</u> _____ <u>12205 Shetland Lane</u> _____ <u>Los Angeles, CA 90049</u> _____ Date or dates debt was incurred _____ Last 4 digits of account number _____ Remarks: Tutor.	As of the petition filing date, the claim is: <u>\$840.00</u> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.8	Nonpriority creditor's name and mailing address <u>Bank of America</u> _____ <u>One Independence Center</u> _____ <u>101 North Tyron Street</u> _____ <u>Charlotte, NC 28255</u> _____ Date or dates debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: <u>\$13,747.98</u> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.9	Nonpriority creditor's name and mailing address <u>Barba, Ashley</u> _____ _____ _____ Date or dates debt was incurred _____ Last 4 digits of account number _____ Remarks: Tutor.	As of the petition filing date, the claim is: <u>\$175.00</u> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.10	Nonpriority creditor's name and mailing address <u>Barber, Paul</u> _____ <u>1505 Southport Dr. Apt. 142</u> _____ <u>Austin, TX 78704</u> _____ Date or dates debt was incurred _____ Last 4 digits of account number _____ Remarks: Tutor.	As of the petition filing date, the claim is: <u>\$5,250.00</u> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes

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3.11	Nonpriority creditor's name and mailing address <u>Barua, Deshana</u> _____ _____ _____ Date or dates debt was incurred _____ Last 4 digits of account number _____ Remarks: Tutor.	As of the petition filing date, the claim is: <u>\$2,102.50</u> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.12	Nonpriority creditor's name and mailing address <u>Batarseh, Reem</u> _____ <u>20 Pine Street #3301</u> _____ <u>New York, NY 10005</u> _____ Date or dates debt was incurred _____ Last 4 digits of account number _____ Remarks: Customer that we owe a refund for services only partially rendered.	As of the petition filing date, the claim is: <u>\$4,544.00</u> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.13	Nonpriority creditor's name and mailing address <u>Bennett, Allycyn</u> _____ <u>10885 Silverado</u> _____ <u>Portland, OR 97282</u> _____ Date or dates debt was incurred _____ Last 4 digits of account number _____ Remarks: Customer that we owe a refund for services only partially rendered.	As of the petition filing date, the claim is: <u>\$3,750.00</u> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.14	Nonpriority creditor's name and mailing address <u>Blake, Kameron</u> _____ <u>91 Magnolia Ave.</u> _____ <u>Jersey City, NJ 07306</u> _____ Date or dates debt was incurred _____ Last 4 digits of account number _____ Remarks: Tutor.	As of the petition filing date, the claim is: <u>\$2,125.00</u> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.15	Nonpriority creditor's name and mailing address <u>Brasseux, Charlotte</u> _____ _____ _____ Date or dates debt was incurred _____ Last 4 digits of account number _____ Remarks: Tutor.	As of the petition filing date, the claim is: <u>\$362.50</u> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes

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3.16	Nonpriority creditor's name and mailing address <u>Caldwell, Brennan</u> <u>38 West 73rd St 2B</u> <u>New York, NY 10023</u> Date or dates debt was incurred _____ Last 4 digits of account number _____ Remarks: Tutor.	As of the petition filing date, the claim is: <u>\$1,120.00</u> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.17	Nonpriority creditor's name and mailing address <u>Candella, Michael</u> <u>85 St Josephs Ave</u> <u>Staten Island, NY 10302</u> Date or dates debt was incurred _____ Last 4 digits of account number _____ Remarks: Port Richmond High School.	As of the petition filing date, the claim is: <u>\$20,000.00</u> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.18	Nonpriority creditor's name and mailing address <u>Capital One Via Signature Business</u> <u>PO Bos 60599</u> <u>City of Industry, CA 91716</u> Date or dates debt was incurred _____ Last 4 digits of account number _____ Remarks:	As of the petition filing date, the claim is: <u>\$25,623.62</u> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.19	Nonpriority creditor's name and mailing address <u>Carlson, Nicholas</u> <u>2017 West Bangs Ave</u> <u>Neptune, NJ 07753</u> Date or dates debt was incurred _____ Last 4 digits of account number _____ Remarks: Tutor.	As of the petition filing date, the claim is: <u>\$150.00</u> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.20	Nonpriority creditor's name and mailing address <u>Cenveo Print Company</u> <u>1102 West Ave. Suite 200</u> <u>Austin, TX 78701</u> Date or dates debt was incurred _____ Last 4 digits of account number _____ Remarks:	As of the petition filing date, the claim is: <u>\$22,000.00</u> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes

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3.21	Nonpriority creditor's name and mailing address <u>Chan, Hazel</u> _____ _____ _____ Date or dates debt was incurred _____ Last 4 digits of account number _____ Remarks: Tutor.	As of the petition filing date, the claim is: <u>\$550.00</u> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.22	Nonpriority creditor's name and mailing address <u>Chapin, Sarah</u> _____ <u>418 W 129th St Apt. 13</u> _____ <u>Vienna, VA 22182</u> _____ Date or dates debt was incurred _____ Last 4 digits of account number _____ Remarks: Tutor.	As of the petition filing date, the claim is: <u>\$150.00</u> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.23	Nonpriority creditor's name and mailing address <u>Charles, Alexander</u> _____ <u>346 N. Vermont Ave #306</u> _____ <u>Los Angeles, CA 90004</u> _____ Date or dates debt was incurred _____ Last 4 digits of account number _____ Remarks: Tutor.	As of the petition filing date, the claim is: <u>\$1,500.00</u> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.24	Nonpriority creditor's name and mailing address <u>Chase</u> _____ <u>National Bank By Mail. Mail Code KY1-0900 416</u> _____ <u>416 West Jefferson Floor 1</u> _____ <u>Louisville, KY 40202</u> _____ Date or dates debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: <u>\$77,931.00</u> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.25	Nonpriority creditor's name and mailing address <u>Chase Visa Freedom Card</u> _____ <u>National Bank By Mail. Mail Code KY1-0900</u> _____ <u>416 West Jefferson Floor 1</u> _____ <u>Louisville, KY 40202</u> _____ Date or dates debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: <u>\$16,563.18</u> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes

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3.26	Nonpriority creditor's name and mailing address <u>Clark, Candice</u> _____ _____ _____ Date or dates debt was incurred _____ Last 4 digits of account number _____ Remarks: Tutor.	As of the petition filing date, the claim is: <u>\$90.00</u> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.27	Nonpriority creditor's name and mailing address <u>Cloutier, Chase</u> _____ <u>105 Hopkins St #402</u> _____ <u>Wakefield, MA 01880</u> _____ Date or dates debt was incurred _____ Last 4 digits of account number _____ Remarks: Tutor.	As of the petition filing date, the claim is: <u>\$790.00</u> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.28	Nonpriority creditor's name and mailing address <u>Creel</u> _____ <u>6330 West Sunset Road</u> _____ <u>Las Vegas, NV 89118</u> _____ Date or dates debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: <u>unknown</u> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.29	Nonpriority creditor's name and mailing address <u>CT Corp</u> _____ <u>Brian Moscoso</u> _____ <u>111 8 th Ave 13th Floor</u> _____ <u>New York, NY 10011</u> _____ Date or dates debt was incurred _____ Last 4 digits of account number _____ Remarks: Registered agent services.	As of the petition filing date, the claim is: <u>\$5,690.00</u> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.30	Nonpriority creditor's name and mailing address <u>Darden, Taylor</u> _____ <u>319 North Preston Street 1F</u> _____ <u>Philadelphia, PA 19104</u> _____ Date or dates debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: <u>\$2,134.95</u> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes

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3.31	Nonpriority creditor's name and mailing address <u>Daren, Taylor</u> <u>319 N Preston St Apt. 1F</u> <u>Philadelphia, PA 19104</u> Date or dates debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: <u>\$2,134.95</u> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.32	Nonpriority creditor's name and mailing address <u>Dave, Sanil</u> _____ _____ _____ Date or dates debt was incurred _____ Last 4 digits of account number _____ Remarks: Tutor.	As of the petition filing date, the claim is: <u>unknown</u> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.33	Nonpriority creditor's name and mailing address <u>De Los Rios, Carlos</u> <u>960 Chalet Circle</u> <u>Thousand Oaks, CA 91362</u> Date or dates debt was incurred _____ Last 4 digits of account number _____ Remarks: Customer that we owe a refund for services only partially rendered.	As of the petition filing date, the claim is: <u>\$1,294.00</u> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.34	Nonpriority creditor's name and mailing address <u>Deakin, Chris</u> <u>636 Ethan Allen HWY</u> <u>Ridgefield, CT 06877</u> Date or dates debt was incurred _____ Last 4 digits of account number _____ Remarks: Tutor.	As of the petition filing date, the claim is: <u>\$150.00</u> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.35	Nonpriority creditor's name and mailing address <u>Debrosse, Justin</u> <u>8 Mountain Road Rockaway</u> <u>Rockaway, NJ 07866</u> Date or dates debt was incurred _____ Last 4 digits of account number _____ Remarks: Tutor.	As of the petition filing date, the claim is: <u>\$4,000.00</u> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes

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3.36	Nonpriority creditor's name and mailing address <u>DeMarco, Amanda</u> <u>357 Tunnel Road</u> <u>Asbury, NJ 08802</u> Date or dates debt was incurred _____ Last 4 digits of account number _____ Remarks: Tutor.	As of the petition filing date, the claim is: <u>unknown</u> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.37	Nonpriority creditor's name and mailing address <u>Ding, Yujia</u> _____ _____ Date or dates debt was incurred _____ Last 4 digits of account number _____ Remarks: Tutor.	As of the petition filing date, the claim is: <u>\$680.00</u> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.38	Nonpriority creditor's name and mailing address <u>Ducille, Chelsea</u> <u>311 Cathedral Street Apt. 2B</u> <u>Baltimore, MD 21201</u> Date or dates debt was incurred _____ Last 4 digits of account number _____ Remarks: Tutor.	As of the petition filing date, the claim is: <u>\$500.00</u> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.39	Nonpriority creditor's name and mailing address <u>Dupuy, Alfred</u> <u>336 Telford Ave.</u> <u>Dayton, OH 45419</u> Date or dates debt was incurred _____ Last 4 digits of account number _____ Remarks: Customer that we owe a refund for services only partially rendered.	As of the petition filing date, the claim is: <u>\$3,999.00</u> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.40	Nonpriority creditor's name and mailing address <u>Dushkewich, Rachel</u> <u>460 Old Town Road Apt 18N</u> <u>Port Jefferson Station, NY 11776</u> Date or dates debt was incurred _____ Last 4 digits of account number _____ Remarks: Tutor.	As of the petition filing date, the claim is: <u>\$375.00</u> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes

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3.41	Nonpriority creditor's name and mailing address <u>Eilers, Lori</u> <u>184 Nottingham Road</u> <u>Ramsey, NJ 07446</u> Date or dates debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: <u>\$3,299.00</u> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.42	Nonpriority creditor's name and mailing address <u>Embassy Suites by Hilton Denton Convention Center</u> <u>Kaylin Homan and Todd Muilenburg</u> Date or dates debt was incurred _____ Last 4 digits of account number _____ Remarks: Cancelled reservation for conference room.	As of the petition filing date, the claim is: <u>\$1,400.00</u> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.43	Nonpriority creditor's name and mailing address <u>Eskin, Kimberly</u> Date or dates debt was incurred _____ Last 4 digits of account number _____ Remarks: Tutor.	As of the petition filing date, the claim is: <u>\$920.00</u> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.44	Nonpriority creditor's name and mailing address <u>Ferdous, Tashif</u> Date or dates debt was incurred _____ Last 4 digits of account number _____ Remarks: Tutor.	As of the petition filing date, the claim is: <u>\$3,675.00</u> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.45	Nonpriority creditor's name and mailing address <u>First Associates</u> <u>Attn: Bond Street Servicing, LLC</u> PO Box 503430 <u>San Diego, CA 92150-3430</u> Date or dates debt was incurred _____	As of the petition filing date, the claim is: <u>\$153,562.18</u> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes

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3.46	Nonpriority creditor's name and mailing address <u>Forrester, Graham</u> _____ _____ _____ Date or dates debt was incurred _____ Last 4 digits of account number _____ Remarks: Tutor.	As of the petition filing date, the claim is: <u>\$637.50</u> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.47	Nonpriority creditor's name and mailing address <u>Fortis, Dawn</u> _____ <u>38 Mela Lane</u> _____ <u>Rancho Palos Verdes, CA 90275</u> _____ Date or dates debt was incurred _____ Last 4 digits of account number _____ Remarks: Customer that we owe a refund for services only partially rendered.	As of the petition filing date, the claim is: <u>\$3,044.00</u> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.48	Nonpriority creditor's name and mailing address <u>Foster, Harrison</u> _____ <u>1217 Douglas St #222</u> _____ <u>Los Angeles, CA 90026</u> _____ Date or dates debt was incurred _____ Last 4 digits of account number _____ Remarks: Tutor.	As of the petition filing date, the claim is: <u>unknown</u> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.49	Nonpriority creditor's name and mailing address <u>Fouquet, Martina</u> _____ <u>9 Gray Street</u> _____ <u>Jersey City, NJ 07302</u> _____ Date or dates debt was incurred _____ Last 4 digits of account number _____ Remarks: Tutor.	As of the petition filing date, the claim is: <u>\$850.00</u> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.50	Nonpriority creditor's name and mailing address <u>Fredette, Julie</u> _____ <u>426 Silver Leaf cir</u> _____ <u>Collegeville, PA 19426</u> _____ Date or dates debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: <u>\$2,544.00</u> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes

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3.51	Nonpriority creditor's name and mailing address <u>Gentile, David</u> _____ _____ _____ Date or dates debt was incurred _____ Last 4 digits of account number _____ Remarks: Tutor.	As of the petition filing date, the claim is: <u>\$180.00</u> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.52	Nonpriority creditor's name and mailing address <u>Golden, Mitchell</u> _____ _____ _____ Date or dates debt was incurred _____ Last 4 digits of account number _____ Remarks: Tutor.	As of the petition filing date, the claim is: <u>\$475.00</u> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.53	Nonpriority creditor's name and mailing address <u>Grant, Jeremy</u> _____ _____ _____ Date or dates debt was incurred _____ Last 4 digits of account number _____ Remarks: Customer that we owe a refund for services only partially rendered.	As of the petition filing date, the claim is: <u>\$1,294.00</u> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.54	Nonpriority creditor's name and mailing address <u>Half, Robert</u> <u>10801-2 N Mopac Expy Suite 220</u> <u>Austin, TX 78759</u> Date or dates debt was incurred _____ Last 4 digits of account number _____ Remarks: Staffing Firm.	As of the petition filing date, the claim is: <u>unknown</u> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.55	Nonpriority creditor's name and mailing address <u>Harris, Latisha</u> _____ _____ _____ Date or dates debt was incurred _____ Last 4 digits of account number _____ Remarks: Tutor.	As of the petition filing date, the claim is: <u>\$1,000.00</u> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes

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3.56	Nonpriority creditor's name and mailing address <u>Hayhurst, Natalie</u> <u>1916 Sager Dr.</u> <u>Austin, TX 78741</u> Date or dates debt was incurred _____ Last 4 digits of account number _____ Remarks: Tutor.	As of the petition filing date, the claim is: <u>\$175.00</u> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.57	Nonpriority creditor's name and mailing address <u>Heyman and Associates</u> <u>Michelle Heyman and Julie Dale</u> <u>2251 Double Creek Dr Suite 101</u> <u>Round Rock, TX 78664</u> Date or dates debt was incurred _____ Last 4 digits of account number _____ Remarks: CPA firm in Austin	As of the petition filing date, the claim is: <u>\$730.00</u> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.58	Nonpriority creditor's name and mailing address <u>Howell, Ryan</u> _____ _____ Date or dates debt was incurred _____ Last 4 digits of account number _____ Remarks: Tutor.	As of the petition filing date, the claim is: <u>\$1,040.00</u> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.59	Nonpriority creditor's name and mailing address <u>Indeed</u> <u>Building 1</u> <u>6433 Champion Grandview Way</u> <u>Austin, TX 78750</u> Date or dates debt was incurred _____ Last 4 digits of account number <u>3 4 3 0</u> Remarks: Online advertising for employees.	As of the petition filing date, the claim is: <u>\$377.76</u> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.60	Nonpriority creditor's name and mailing address <u>Isser, Micah</u> _____ _____ Date or dates debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: <u>\$262.50</u> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes

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3.61	Nonpriority creditor's name and mailing address <u>Jaramillo, Amanda</u> _____ _____ _____ Date or dates debt was incurred _____ Last 4 digits of account number _____ Remarks: Tutor.	As of the petition filing date, the claim is: <u>\$150.00</u> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.62	Nonpriority creditor's name and mailing address <u>Johnson, Erica</u> _____ <u>843 W 15th Street Apt. 28</u> _____ <u>Newport Beach, CA 92663</u> _____ Date or dates debt was incurred _____ Last 4 digits of account number _____ Remarks: Tutor.	As of the petition filing date, the claim is: <u>\$112.50</u> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.63	Nonpriority creditor's name and mailing address <u>Kabbage</u> _____ <u>730 Peachtree St NE Suite #1100</u> _____ <u>Atlanta, GA 30308</u> _____ Date or dates debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: <u>\$15,684.00</u> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.64	Nonpriority creditor's name and mailing address <u>Kallas, Jennifer</u> _____ <u>23025 Madison Street Unit 22</u> _____ <u>Torrance, CA 90505</u> _____ Date or dates debt was incurred _____ Last 4 digits of account number _____ Remarks: Graphic Designer	As of the petition filing date, the claim is: <u>\$11,245.00</u> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.65	Nonpriority creditor's name and mailing address <u>Klaneski, Rosa</u> _____ <u>8 Farmington Meadow Dr.</u> _____ <u>Farmington, CT 06032</u> _____ Date or dates debt was incurred _____ Last 4 digits of account number _____ Remarks: Tutor.	As of the petition filing date, the claim is: <u>\$1,500.00</u> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes

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3.66	Nonpriority creditor's name and mailing address <u>Klaneski, Rosa Lee</u> <u>8 Farmington Meadow Drive</u> <u>Farmington, CT 06032</u> Date or dates debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: <u>\$1,192.47</u> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.67	Nonpriority creditor's name and mailing address <u>Klinger, Bettina</u> <u>351 E 84th Street Apt. 11D</u> <u>New York, NY 10028</u> Date or dates debt was incurred _____ Last 4 digits of account number _____ Remarks: Customer that we owe a refund for services only partially rendered.	As of the petition filing date, the claim is: <u>\$2,499.00</u> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.68	Nonpriority creditor's name and mailing address <u>Ko, David</u> <u>2151 Logan Ave Section B</u> <u>San Diego, CA 92113</u> Date or dates debt was incurred _____ Last 4 digits of account number _____ Remarks: Tutor.	As of the petition filing date, the claim is: <u>\$1,574.50</u> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.69	Nonpriority creditor's name and mailing address <u>Kollen, Marjorie</u> <u>49 Colorado Rancho</u> <u>Rancho Santa Margarita, CA 92688</u> Date or dates debt was incurred _____ Last 4 digits of account number _____ Remarks: Tutor.	As of the petition filing date, the claim is: <u>\$80.00</u> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.70	Nonpriority creditor's name and mailing address <u>Koppolu, Maithu</u> <u>10943 Vereda Sol Del Dios</u> <u>San Diego, CA 92130</u> Date or dates debt was incurred _____ Last 4 digits of account number _____ Remarks: Tutor.	As of the petition filing date, the claim is: <u>\$225.00</u> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes

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3.71	Nonpriority creditor's name and mailing address <u>Lacovelli, Sara</u> <u>151 N Cottage St</u> <u>Valley Stream, NY 11580</u> Date or dates debt was incurred _____ Last 4 digits of account number _____ Remarks: Tutor.	As of the petition filing date, the claim is: <u>\$970.00</u> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.72	Nonpriority creditor's name and mailing address <u>Le, Elvis</u> _____ _____ Date or dates debt was incurred _____ Last 4 digits of account number _____ Remarks: Tutor.	As of the petition filing date, the claim is: <u>\$520.00</u> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.73	Nonpriority creditor's name and mailing address <u>Levine, Michelle</u> _____ _____ Date or dates debt was incurred _____ Last 4 digits of account number _____ Remarks: Tutor.	As of the petition filing date, the claim is: <u>\$125.00</u> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.74	Nonpriority creditor's name and mailing address <u>Lim, Sarah</u> _____ _____ Date or dates debt was incurred _____ Last 4 digits of account number _____ Remarks: Tutor.	As of the petition filing date, the claim is: <u>\$375.00</u> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.75	Nonpriority creditor's name and mailing address <u>Lin, Andrew</u> <u>30 Via Milpitas</u> <u>Carmel Valley, CA 93924</u> Date or dates debt was incurred _____ Last 4 digits of account number _____ Remarks: Refund for student Ryan. Withdrew enrollment.	As of the petition filing date, the claim is: <u>\$5,500.00</u> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes

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3.76	Nonpriority creditor's name and mailing address <u>Littler Mendelson</u> <u>Jackie Hoard</u> <u>1301 McKinney St #1900</u> <u>Houston, TX 77010</u> Date or dates debt was incurred _____ Last 4 digits of account number _____ Remarks: Law Firm - Employment matters	As of the petition filing date, the claim is: <u>\$3,149.50</u> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.77	Nonpriority creditor's name and mailing address <u>Long, Bradley</u> _____ _____ _____ Date or dates debt was incurred _____ Last 4 digits of account number _____ Remarks: Tutor.	As of the petition filing date, the claim is: <u>\$587.50</u> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.78	Nonpriority creditor's name and mailing address <u>Lopez, Heather</u> <u>3 Hearthshire St.</u> <u>Magnolia, TX 77354</u> Date or dates debt was incurred _____ Last 4 digits of account number _____ Remarks: Customer that we owe a refund for services only partially rendered.	As of the petition filing date, the claim is: <u>\$1,522.00</u> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.79	Nonpriority creditor's name and mailing address <u>MacCabe, Cameron</u> _____ _____ _____ Date or dates debt was incurred _____ Last 4 digits of account number _____ Remarks: Tutor.	As of the petition filing date, the claim is: <u>\$1,300.00</u> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.80	Nonpriority creditor's name and mailing address <u>MacCabe, Cameron</u> _____ _____ _____ Date or dates debt was incurred _____ Last 4 digits of account number _____ Remarks:	As of the petition filing date, the claim is: <u>\$1,300.00</u> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes

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3.81	Nonpriority creditor's name and mailing address <u>MacKinnon, Duncan</u> <u>372 Union Street</u> <u>Jersey City, NJ 07304</u> Date or dates debt was incurred _____ Last 4 digits of account number _____ Remarks: Tutor.	As of the petition filing date, the claim is: <u>\$7,402.00</u> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.82	Nonpriority creditor's name and mailing address <u>Matthew, Naomi</u> _____ _____ Date or dates debt was incurred _____ Last 4 digits of account number _____ Remarks: Tutor.	As of the petition filing date, the claim is: <u>\$171.75</u> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.83	Nonpriority creditor's name and mailing address <u>McBlane, Georgia Jansen</u> <u>315 Rogers Rd</u> <u>Norristown, PA 19403</u> Date or dates debt was incurred _____ Last 4 digits of account number _____ Remarks: Tutor.	As of the petition filing date, the claim is: <u>\$250.00</u> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.84	Nonpriority creditor's name and mailing address <u>Mendelson, Goldman and Schwarz, APC</u> <u>Marc A. Schwarz</u> <u>5805 Sepulveda Blvd. Suite 850</u> <u>Van Nuys, CA 91411</u> Date or dates debt was incurred _____ Last 4 digits of account number <u>1 9 9 1</u> Remarks: Bought State Farm debt (FILE: State Farm v Catalyst Prep; 17001991).	As of the petition filing date, the claim is: <u>\$49,241.02</u> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.85	Nonpriority creditor's name and mailing address <u>Merchant, Tazim</u> <u>89 Fruitledge Road</u> <u>Glen Head, NY 11545</u> Date or dates debt was incurred _____ Last 4 digits of account number _____ Remarks: Tutor.	As of the petition filing date, the claim is: <u>\$2,000.00</u> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes

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3.86	Nonpriority creditor's name and mailing address <u>Mirkin, Joshua</u> _____ _____ _____ Date or dates debt was incurred _____ Last 4 digits of account number _____ Remarks: Tutor.	As of the petition filing date, the claim is: <u>\$1,190.00</u> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.87	Nonpriority creditor's name and mailing address <u>Mitsch, Jackie</u> _____ <u>9 Sycamore Lane</u> _____ <u>Rumson, NJ 07760</u> _____ Date or dates debt was incurred _____ Last 4 digits of account number _____ Remarks: Customer that we owe a refund for services only partially rendered.	As of the petition filing date, the claim is: <u>\$1,744.00</u> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.88	Nonpriority creditor's name and mailing address <u>Nguyen, Nathan</u> _____ _____ _____ Date or dates debt was incurred _____ Last 4 digits of account number _____ Remarks: Tutor.	As of the petition filing date, the claim is: <u>\$1,125.00</u> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.89	Nonpriority creditor's name and mailing address <u>Noh, Sharon</u> _____ _____ _____ Date or dates debt was incurred _____ Last 4 digits of account number _____ Remarks: Tutor.	As of the petition filing date, the claim is: <u>\$731.53</u> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.90	Nonpriority creditor's name and mailing address <u>OFFICETEAM</u> _____ <u>Robert Half / Recovery Department</u> _____ <u>PO Box 5024</u> _____ <u>San Ramon, CA 94583</u> _____ Date or dates debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: <u>\$12,500.14</u> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes

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3.91	Nonpriority creditor's name and mailing address <u>Oliver, Amber</u> <u>8515 Millers Bend</u> <u>Bahama, NC 27503</u> Date or dates debt was incurred _____ Last 4 digits of account number _____ Remarks: Tutor.	As of the petition filing date, the claim is: <u>\$10,000.00</u> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.92	Nonpriority creditor's name and mailing address <u>Oren, Talia</u> <u>18880 Baker Road</u> <u>Bend, OR 97702</u> Date or dates debt was incurred _____ Last 4 digits of account number _____ Remarks: Tutor.	As of the petition filing date, the claim is: <u>\$480.00</u> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.93	Nonpriority creditor's name and mailing address <u>Panica, Erin</u> <u>21030 Mossy Glen Terrace</u> <u>Ashburn, VA 20147</u> Date or dates debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: <u>\$3,534.00</u> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.94	Nonpriority creditor's name and mailing address <u>Paravastu, Sharon</u> <u>4200 Bay Street Apt. 254</u> <u>Fremont, CA 94538</u> Date or dates debt was incurred _____ Last 4 digits of account number _____ Remarks: Tutor.	As of the petition filing date, the claim is: <u>\$337.50</u> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.95	Nonpriority creditor's name and mailing address <u>Perkowski, Peter</u> <u>445 S. Figueroa St. Suite 3100</u> <u>Los Angeles, CA 90071</u> Date or dates debt was incurred _____ Last 4 digits of account number _____ Remarks: Attorney - IP Matters	As of the petition filing date, the claim is: <u>\$2,410.00</u> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes

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3.96	Nonpriority creditor's name and mailing address <u>Perron, Erinn</u> <u>200 Hiawatha Blvd.</u> <u>Oakland, NJ 07436</u> Date or dates debt was incurred _____ Last 4 digits of account number _____ Remarks: Customer that we owe a refund for services only partially rendered.	As of the petition filing date, the claim is: <u>\$20.00</u> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.97	Nonpriority creditor's name and mailing address <u>Perry, Allison</u> _____ _____ _____ Date or dates debt was incurred _____ Last 4 digits of account number _____ Remarks: Tutor	As of the petition filing date, the claim is: <u>\$1,500.00</u> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.98	Nonpriority creditor's name and mailing address <u>Powell, Blaine</u> <u>9757 Oaseo Monril</u> <u>San Diego, CA 92129</u> Date or dates debt was incurred _____ Last 4 digits of account number _____ Remarks: Customer that we owe a refund for services only partially rendered.	As of the petition filing date, the claim is: <u>\$1,000.00</u> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.99	Nonpriority creditor's name and mailing address <u>Purring, Marantha</u> <u>7215 Howard Terrace</u> <u>Philadelphia, PA 19119</u> Date or dates debt was incurred _____ Last 4 digits of account number _____ Remarks: Tutor.	As of the petition filing date, the claim is: <u>\$125.00</u> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.100	Nonpriority creditor's name and mailing address <u>Radu-Blackburn, Robert</u> <u>84-06 109th Street Apt C7</u> <u>Richmond Hill, NY 11418</u> Date or dates debt was incurred _____ Last 4 digits of account number _____ Remarks: Tutor.	As of the petition filing date, the claim is: <u>\$1,160.00</u> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes

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3.101	Nonpriority creditor's name and mailing address <u>Rajasekaran, Prithvi</u> _____ _____ _____ Date or dates debt was incurred _____ Last 4 digits of account number _____ Remarks: Tutor.	As of the petition filing date, the claim is: <u>\$450.00</u> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.102	Nonpriority creditor's name and mailing address <u>Ramapo Indian Hills Regional High School District</u> <u>Grace Stramiello</u> _____ _____ Date or dates debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: <u>\$400.00</u> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.103	Nonpriority creditor's name and mailing address <u>Rehman, Obaid</u> _____ _____ _____ Date or dates debt was incurred _____ Last 4 digits of account number _____ Remarks: Tutor.	As of the petition filing date, the claim is: <u>\$1,418.78</u> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.104	Nonpriority creditor's name and mailing address <u>Reichbach, Andrea</u> <u>10B Heritage Hills</u> <u>Somers, NY 10859</u> _____ Date or dates debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: <u>\$1,499.00</u> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.105	Nonpriority creditor's name and mailing address <u>Renkosiak, Kaitlin</u> _____ _____ _____ Date or dates debt was incurred _____ Last 4 digits of account number _____ Remarks: Tutor.	As of the petition filing date, the claim is: <u>\$450.00</u> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes

Part 2: Additional Page

3.106	Nonpriority creditor's name and mailing address <u>Richman, Linda</u> <u>277 Prospect Park West Apt 2</u> <u>Brooklyn, NY 11215</u> Date or dates debt was incurred _____ Last 4 digits of account number _____ Remarks: Customer that we owe a refund for services only partially rendered.	As of the petition filing date, the claim is: <u>\$4,044.00</u> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.107	Nonpriority creditor's name and mailing address <u>Robillard, Rana</u> <u>3920 Ardley Ave</u> <u>Oakland, CA 94602</u> Date or dates debt was incurred _____ Last 4 digits of account number _____ Remarks: Customer that we owe a refund for services only partially rendered.	As of the petition filing date, the claim is: <u>\$2,499.00</u> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.108	Nonpriority creditor's name and mailing address <u>Rolls, Sandy</u> <u>513 Green Pastures #C</u> <u>Kyle, TX 78640</u> Date or dates debt was incurred _____ Last 4 digits of account number _____ Remarks: Bookkeeper in Austin.	As of the petition filing date, the claim is: <u>\$420.00</u> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.109	Nonpriority creditor's name and mailing address <u>Rosolanko, Nick</u> <u>364 Mulberry Court</u> <u>Wyckoff, NJ 07481</u> Date or dates debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: <u>\$1,544.00</u> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.110	Nonpriority creditor's name and mailing address <u>Ryu, Allison</u> _____ _____ _____ Date or dates debt was incurred _____ Last 4 digits of account number _____ Remarks: Tutor.	As of the petition filing date, the claim is: <u>\$1,285.76</u> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes

Debtor Catalyst Prep LLC
Name _____

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3.111	Nonpriority creditor's name and mailing address <u>Salman, Masha</u> <u>33 Sky Top Ridge</u> <u>Date or dates debt was incurred</u> _____ <u>Last 4 digits of account number</u> _____ <u>Remarks:</u> Customer that we owe a refund for services only partially rendered.	As of the petition filing date, the claim is: <u>\$750.00</u> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.112	Nonpriority creditor's name and mailing address <u>Schwartzenberger, Grace</u> <u>5934 Tobias Avenue</u> <u>Van Nuys, CA 91411</u> <u>Date or dates debt was incurred</u> _____ <u>Last 4 digits of account number</u> _____ <u>Remarks:</u> Tutor.	As of the petition filing date, the claim is: <u>\$360.00</u> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.113	Nonpriority creditor's name and mailing address <u>Shaikh, Zafar</u> <u>27318 Wooded Canyon Drive</u> <u>Katy, TX 77494</u> <u>Date or dates debt was incurred</u> _____ <u>Last 4 digits of account number</u> _____ <u>Remarks:</u> Customer that we owe a refund for services only partially rendered.	As of the petition filing date, the claim is: <u>\$4,044.00</u> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.114	Nonpriority creditor's name and mailing address <u>Smith, John Hawthorne</u> <u>Date or dates debt was incurred</u> _____ <u>Last 4 digits of account number</u> _____ <u>Remarks:</u> Tutor.	As of the petition filing date, the claim is: <u>\$5,000.00</u> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.115	Nonpriority creditor's name and mailing address <u>Square</u> <u>1455 Market Street Suite 600</u> <u>San Francisco, CA 94103</u> <u>Date or dates debt was incurred</u> _____ <u>Last 4 digits of account number</u> _____ <u>Remarks:</u> Credit Card processing. Began using when Chase cut me off. Have negative balance with them due to customer chargebacks.	As of the petition filing date, the claim is: <u>\$8,148.86</u> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes

Debtor Catalyst Prep LLC
Name _____

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3.116	Nonpriority creditor's name and mailing address <u>State Farm Insurance</u> <u>5805 Sepulveda Blvd Suite 850</u> <u>Van Nuys, CA 91411</u> Date or dates debt was incurred _____ Last 4 digits of account number _____ Remarks: Insurance and Workers' Comp	As of the petition filing date, the claim is: <u>\$49,241.02</u> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.117	Nonpriority creditor's name and mailing address <u>Steinhorn, Jeffrey</u> <u>16 Tiger Hill Drive</u> <u>Gladstone, NJ 07934</u> Date or dates debt was incurred _____ Last 4 digits of account number _____ Remarks: Customer that we owe a refund for services only partially rendered.	As of the petition filing date, the claim is: <u>\$894.50</u> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.118	Nonpriority creditor's name and mailing address <u>Stratton, Samantha</u> _____ _____ Date or dates debt was incurred _____ Last 4 digits of account number _____ Remarks: Tutor.	As of the petition filing date, the claim is: <u>\$950.00</u> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.119	Nonpriority creditor's name and mailing address <u>Tam, David</u> <u>1965 W Lamar St #4</u> <u>Houston, TX 77019</u> Date or dates debt was incurred _____ Last 4 digits of account number _____ Remarks: Tutor.	As of the petition filing date, the claim is: <u>\$1,050.00</u> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.120	Nonpriority creditor's name and mailing address <u>Tan, Kenny</u> _____ _____ Date or dates debt was incurred _____ Last 4 digits of account number _____ Remarks: Tutor.	As of the petition filing date, the claim is: <u>\$535.00</u> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes

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3.121	Nonpriority creditor's name and mailing address <u>Travis, Jennifer</u> <u>197 Guinea Road</u> <u>Storrs Mansfield, CT 06268</u> Date or dates debt was incurred _____ Last 4 digits of account number _____ Remarks: Customer that we owe a refund for services only partially rendered.	As of the petition filing date, the claim is: <u>\$1,000.00</u> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.122	Nonpriority creditor's name and mailing address <u>Tyagi, Shristi</u> _____ _____ Date or dates debt was incurred _____ Last 4 digits of account number _____ Remarks: Tutor.	As of the petition filing date, the claim is: <u>\$537.50</u> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.123	Nonpriority creditor's name and mailing address <u>Valatka, Patricia</u> <u>676 Park Ave.</u> <u>East Orange, NJ 07017</u> Date or dates debt was incurred _____ Last 4 digits of account number _____ Remarks: Tutor.	As of the petition filing date, the claim is: <u>\$350.00</u> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.124	Nonpriority creditor's name and mailing address <u>Vallejos, Derrick</u> <u>11 South Lawrence Ave</u> <u>Elmsford, NY 10523</u> Date or dates debt was incurred _____ Last 4 digits of account number _____ Remarks: Tutor.	As of the petition filing date, the claim is: <u>\$450.00</u> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.125	Nonpriority creditor's name and mailing address <u>Vaziri, Catherine</u> <u>2717 South Lamar Blvd. Apt. 3089</u> <u>Austin, TX 78704</u> Date or dates debt was incurred _____ Last 4 digits of account number _____ Remarks: Tutor.	As of the petition filing date, the claim is: <u>unknown</u> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes

Debtor Catalyst Prep LLC
Name _____

Case number (if known) 19-11236

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3.126	Nonpriority creditor's name and mailing address <u>Wagner, Hayley</u> _____ _____ _____ Date or dates debt was incurred _____ Last 4 digits of account number _____ Remarks: Tutor.	As of the petition filing date, the claim is: <u>\$860.00</u> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.127	Nonpriority creditor's name and mailing address <u>Walters, Erik</u> _____ <u>16711 Diane Lane</u> _____ <u>Huntington Beach, CA 92647</u> _____ Date or dates debt was incurred _____ Last 4 digits of account number _____ Remarks: Customer that we owe a refund for services only partially rendered.	As of the petition filing date, the claim is: <u>\$2,999.00</u> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.128	Nonpriority creditor's name and mailing address <u>Weinstein, Michael</u> _____ <u>20 Montauk Lane</u> _____ <u>Vernon Hills, IL 60061</u> _____ Date or dates debt was incurred _____ Last 4 digits of account number _____ Remarks: Tutor.	As of the petition filing date, the claim is: <u>\$1,375.00</u> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.129	Nonpriority creditor's name and mailing address <u>Wenzlaff, Michael</u> _____ <u>13414 Barlett Street</u> _____ <u>Rockville, MD 20853</u> _____ Date or dates debt was incurred _____ Last 4 digits of account number _____ Remarks: Tutor.	As of the petition filing date, the claim is: <u>\$4,633.76</u> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.130	Nonpriority creditor's name and mailing address <u>Westfield High School PTSO</u> _____ <u>Carolyn Miller</u> _____ <u>521 Prospect St</u> _____ <u>Westfield, NJ 07090</u> _____ Date or dates debt was incurred _____ Last 4 digits of account number _____ Remarks: Parent organization with Westfield HS in NJ. Owe funds for	As of the petition filing date, the claim is: <u>\$500.00</u> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes

Debtor Catalyst Prep LLC
Name _____

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Part 2: Additional Page

3.131	Nonpriority creditor's name and mailing address <u>Williams, Dwight</u> <u>27379 SW 143rd Ct.</u> <u>Homestead, FL 33032</u> Date or dates debt was incurred _____ Last 4 digits of account number _____ Remarks: Tutor.	As of the petition filing date, the claim is: <u>unknown</u> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.132	Nonpriority creditor's name and mailing address <u>Williams, Julie</u> <u>13 Sheraton Lane</u> <u>Rumson, NJ 07760</u> Date or dates debt was incurred _____ Last 4 digits of account number _____ Remarks: Customer that we owe a refund for services only partially rendered.	As of the petition filing date, the claim is: <u>\$4,000.00</u> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.133	Nonpriority creditor's name and mailing address <u>Williams, Kayla</u> _____ _____ Date or dates debt was incurred _____ Last 4 digits of account number _____ Remarks: Tutor.	As of the petition filing date, the claim is: <u>\$700.00</u> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.134	Nonpriority creditor's name and mailing address <u>Yarima, Altini</u> <u>301 N Wesley Drive Apt. 611</u> <u>League City, TX 77573</u> Date or dates debt was incurred _____ Last 4 digits of account number _____ Remarks: Tutor.	As of the petition filing date, the claim is: <u>\$400.00</u> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.135	Nonpriority creditor's name and mailing address <u>Yu, Cissy</u> <u>315 E. 119th Street 3</u> <u>New York, NY 10035</u> Date or dates debt was incurred _____ Last 4 digits of account number _____ Remarks: Tutor.	As of the petition filing date, the claim is: <u>\$450.00</u> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes

Debtor Catalyst Prep LLC
Name _____

Case number (if known) 19-11236

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3.136	Nonpriority creditor's name and mailing address <u>Yuan, Catherine</u> _____ _____ _____	As of the petition filing date, the claim is: <u>\$550.00</u> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed
	Date or dates debt was incurred _____ Last 4 digits of account number _____	Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
	Remarks: Tutor.	
3.137	Nonpriority creditor's name and mailing address <u>Zukoff, Alexander</u> _____ <u>81 Cooper Blvd</u> _____ <u>Red Bank, NJ 07701</u> _____	As of the petition filing date, the claim is: <u>\$1,305.00</u> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed
	Date or dates debt was incurred _____ Last 4 digits of account number _____	Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
	Remarks: Tutor.	
3.138	Nonpriority creditor's name and mailing address <u>Zurfluh, Cynda</u> _____ <u>13136 Ladybank Lane</u> _____ <u>Herndon, VA 20171</u> _____	As of the petition filing date, the claim is: <u>\$1,499.00</u> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed
	Date or dates debt was incurred _____ Last 4 digits of account number _____	Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
	Remarks: Customer that we owe a refund for services only partially rendered.	

Debtor Catalyst Prep LLC
Name _____

Case number (if known) 19-11236

Part 3: List Others to Be Notified About Unsecured Claims

4. List in alphabetical order any others who must be notified for claims listed in Parts 1 and 2. Examples of entities that may be listed are collection agencies, assignees of claims listed above, and attorneys for unsecured creditors.

If no others need to be notified for the debts listed in Parts 1 and 2, do not fill out or submit this page. If additional pages are needed, copy the next page.

Name and mailing address

On which line in Part 1 or Part 2 is the related
creditor (if any) listed?

Last 4 digits of
account number,
if any

4.1 Marc A. Schwarz, Esq

Line 3.116

☐ Not listed. Explain _____

5805 Sepulveda Blvd Suite 850

Van Nuys, CA 91411

Debtor Catalyst Prep LLC
Name

Case number (if known) 19-11236

Part 4: Total Amounts of the Priority and Nonpriority Unsecured Claims

5. Add the amounts of priority and nonpriority unsecured claims.

Total of claim amounts

5a. Total claims from Part 1 5a. \$15,747.67

5b. Total claims from Part 2 5b. + \$675,759.71

5c. Total of Parts 1 and 2 5c. \$691,507.38
Lines 5a + 5b = 5c.

Fill in this information to identify the case:

Debtor name Catalyst Prep LLC

United States Bankruptcy Court for the:
Western District of Texas, Austin Division

Case number (if known): 19-11236 Chapter 7

☐ Check if this is an amended filing

Official Form 206G

Schedule G: Executory Contracts and Unexpired Leases

12/15

Be as complete and accurate as possible. If more space is needed, copy and attach the additional page, numbering the entries consecutively.

1. Does the debtor have any executory contracts or unexpired leases?

☒ No. Check this box and file this form with the court with the debtor's other schedules. There is nothing else to report on this form.

☐ Yes. Fill in all of the information below even if the contracts or leases are listed on *Schedule A/B: Assets - Real and Personal Property* (Official Form 206A/B).

2. List all contracts and unexpired leases

State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease

2.1	State what the contract or lease is for and the nature of the debtor's interest		
	State the term remaining		
	List the contract number of any government contract		
2.2	State what the contract or lease is for and the nature of the debtor's interest		
	State the term remaining		
	List the contract number of any government contract		
2.3	State what the contract or lease is for and the nature of the debtor's interest		
	State the term remaining		
	List the contract number of any government contract		
2.4	State what the contract or lease is for and the nature of the debtor's interest		
	State the term remaining		
	List the contract number of any government contract		
2.5	State what the contract or lease is for and the nature of the debtor's interest		
	State the term remaining		
	List the contract number of any government contract		

Debtor Catalyst Prep LLC
Name

Case number (if known) 19-11236

Additional Page if Debtor Has More Codebtors

Copy this page only if more space is needed. Continue numbering the lines sequentially from the previous page.

Column 1: Codebtor		Column 2: Creditor	
Name	Mailing Address	Name	Check all schedules that apply:
2.6	<div>Street</div> <div></div> <div>CityStateZIP Code</div>		

Fill in this information to identify the case:

Debtor name Catalyst Prep LLC

United States Bankruptcy Court for the:
Western District of Texas, Austin Division

Case number (if known): 19-11236 Chapter 7

☐ Check if this is an amended filing

Official Form 206Sum

Summary of Assets and Liabilities for Non-Individuals

12/15

Part 1: Summary of Assets

1. **Schedule A/B: Assets—Real and Personal Property** (Official Form 206A/B)

1a. Real Property:

Copy line 88 from *Schedule A/B*.....

\$0.00

1b. Total personal property:

Copy line 91A from *Schedule A/B*.....

\$5,005,500.00

1c. Total of all property:

Copy line 92 from *Schedule A/B*.....

\$5,005,500.00

Part 2: Summary of Liabilities

2. **Schedule D: Creditors Who Have Claims Secured by Property** (Official Form 206D)

Copy the total dollar amount listed in Column A, *Amount of claim*, from line 3 of *Schedule D*.....

\$9,000.00

3. **Schedule E/F: Creditors Who Have Unsecured Claims** (Official Form 206E/F)

3a. Total claim amounts of priority unsecured claims:

Copy the total claims from Part 1 from line 5a of *Schedule E/F*.....

\$15,747.67

3b. Total amount of claims of non-priority amount of unsecured claims:

Copy the total of the amount of claims from Part 2 from line 5b of *Schedule E/F*.....

+ \$675,759.71

4. Total liabilities.....

Lines 2 + 3a + 3b

\$700,507.38

Fill in this information to identify the case:

Debtor name Catalyst Prep LLC

United States Bankruptcy Court for the:
Western District of Texas, Austin Division

Case number (if known): 19-11236

☐ Check if this is an
amended filing

Official Form 207

Statement of Financial Affairs for Non-Individuals Filing for Bankruptcy 04/19

The debtor must answer every question. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write the debtor's name and case number (if known).

Part 1: Income

1. Gross revenue from business

☒ None

Identify the beginning and ending dates of the debtor's fiscal year, which may be a calendar year

Sources of revenue

Check all that apply

Gross revenue

(before deductions and
exclusions)

From the beginning of the
fiscal year to filing date:

From 01/01/2019 to Filing date
MM/ DD/ YYYY

☐ Operating a business

☐ Other _____

For prior year:

From 01/01/2018 to 12/31/2018
MM/ DD/ YYYY MM/ DD/ YYYY

☐ Operating a business

☐ Other _____

For the year before that:

From 01/01/2017 to 12/31/2017
MM/ DD/ YYYY MM/ DD/ YYYY

☐ Operating a business

☐ Other _____

2. Non-business revenue

Include revenue regardless of whether that revenue is taxable. *Non-business income* may include interest, dividends, money collected from lawsuits, and royalties. List each source and the gross revenue for each separately. Do not include revenue listed in line 1.

☒ None

Description of sources of revenue

Gross revenue from each source

(before deductions and
exclusions)

From the beginning of the
fiscal year to filing date:

From 01/01/2019 to Filing date
MM/ DD/ YYYY

For prior year:

From 01/01/2018 to 12/31/2018
MM/ DD/ YYYY MM/ DD/ YYYY

For the year before that:

From 01/01/2017 to 12/31/2017
MM/ DD/ YYYY MM/ DD/ YYYY

Debtor Catalyst Prep LLC
Name _____

Case number (if known) 19-11236

Part 2: List Certain Transfers Made Before Filing for Bankruptcy

3. Certain payments or transfers to creditors within 90 days before filing this case

List payments or transfers—including expense reimbursements—to any creditor, other than regular employee compensation, within 90 days before filing this case unless the aggregate value of all property transferred to that creditor is less than \$6,825. (This amount may be adjusted on 4/01/22 and every 3 years after that with respect to cases filed on or after the date of adjustment.)

☐ None

Creditor's name and address	Dates	Total amount or value	Reasons for payment or transfer <i>Check all that apply</i>
3.1. <u>Ogle Properties LLC</u> Creditor's name Street <u>3600 Bee Caves Rd</u> <u>Austin, TX 78746</u> City State ZIP Code	<u>07/15/2019</u>	<u>\$7,500.00</u>	<input type="checkbox"/> Secured debt <input type="checkbox"/> Unsecured loan repayments <input type="checkbox"/> Suppliers or vendors <input type="checkbox"/> Services <input checked="" type="checkbox"/> Other <u>Repossession</u>

4. Payments or other transfers of property made within 1 year before filing this case that benefited any insider

List payments or transfers, including expense reimbursements, made within 1 year before filing this case on debts owed to an insider or guaranteed or co-signed by an insider unless the aggregate value of all property transferred to or for the benefit of the insider is less than \$6,825. (This amount may be adjusted on 4/01/22 and every 3 years after that with respect to cases filed on or after the date of adjustment.) Do not include any payments listed in line 3. *Insiders* include officers, directors, and anyone in control of a corporate debtor and their relatives; general partners of a partnership debtor and their relatives; affiliates of the debtor and insiders of such affiliates; and any managing agent of the debtor. 11 U.S.C. § 101(31).

☒ None

Insider's name and address	Dates	Total amount or value	Reasons for payment or transfer
4.1. _____ Creditor's name Street _____ City State ZIP Code Relationship to debtor _____	_____ _____ _____ _____	_____ _____ _____ _____	_____ _____ _____ _____

5. Repossessions, foreclosures, and returns

List all property of the debtor that was obtained by a creditor within 1 year before filing this case, including property repossessed by a creditor, sold at a foreclosure sale, transferred by a deed in lieu of foreclosure, or returned to the seller. Do not include property listed in line 6.

☐ None

Creditor's name and address	Description of the property	Date	Value of property
5.1. <u>Ogle Properties LLC</u> Creditor's name <u>3600 Bee Caves</u> Street <u>Austin, TX 78746</u> City State ZIP Code	<u>office furniture and equipment</u>	<u>07/15/2019</u>	<u>\$7,500.00</u>

Debtor Catalyst Prep LLC Case number (if known) 19-11236
Name

5.2. numerous chargebacks \$100,000.00
Creditor's name

Street

TX
City State ZIP Code

6. Setoffs

List any creditor, including a bank or financial institution, that within 90 days before filing this case set off or otherwise took anything from an account of the debtor without permission or refused to make a payment at the debtor's direction from an account of the debtor because the debtor owed a debt.

☒ None

Creditor's name and address	Description of the action creditor took	Date action was taken	Amount
5.1. _____ Creditor's name _____ Street _____ City State ZIP Code	XXXX- _____	_____	_____

Part 3: Legal Actions or Assignments

7. Legal actions, administrative proceedings, court actions, executions, attachments, or governmental audits

List the legal actions, proceedings, investigations, arbitrations, mediations, and audits by federal or state agencies in which the debtor was involved in any capacity —within 1 year before filing this case.

☐ None

Case title	Nature of case	Court or agency's name and address	Status of case
7.1. <u>State Farm v. Catalyst Prep LLC</u> Case number <u>17001991</u>	<u>Breach of Contract</u>	<u>California</u> Name _____ Street _____ City State ZIP Code	<input checked="" type="checkbox"/> Pending <input type="checkbox"/> On appeal <input type="checkbox"/> Concluded
7.2. <u>Charles v. Catalyst Prep LLC et al.</u> Case number <u>C19-01643</u>	<u>Class Action</u>	<u>California Superior Court</u> Name _____ Street _____ City State ZIP Code	<input checked="" type="checkbox"/> Pending <input type="checkbox"/> On appeal <input type="checkbox"/> Concluded

8. Assignments and receivership

List any property in the hands of an assignee for the benefit of creditors during the 120 days before filing this case and any property in the hands of a receiver, custodian, or other court-appointed officer within 1 year before filing this case.

☒ None

Debtor Catalyst Prep LLC
Name _____

Case number (if known) 19-11236

8.1.	Custodian's name and address	Description of the property	Value
	Custodian's name _____ Street _____ City _____ State _____ ZIP Code _____	Case title _____ Case number _____ Date of order or assignment _____	Court name and address _____ Name _____ Street _____ City _____ State _____ ZIP Code _____

Part 4: Certain Gifts and Charitable Contributions

9. List all gifts or charitable contributions the debtor gave to a recipient within 2 years before filing this case unless the aggregate value of the gifts to that recipient is less than \$1,000

☒ None

9.1.	Recipient's name and address	Description of the gifts or contributions	Dates given	Value
	Recipient's name _____ Street _____ City _____ State _____ ZIP Code _____ Recipient's relationship to debtor _____			

Part 5: Certain Losses

10. All losses from fire, theft, or other casualty within 1 year before filing this case.

☒ None

Description of the property lost and how the loss occurred	Amount of payments received for the loss If you have received payments to cover the loss, for example, from insurance, government compensation, or tort liability, list the total received. List unpaid claims on Official Form 106A/B (Schedule A/B: Assets – Real and Personal Property).	Date of loss	Value of property lost
10.1. _____			

Part 6: Certain Payments or Transfers

11. Payments related to bankruptcy

List any payments of money or other transfers of property made by the debtor or person acting on behalf of the debtor within 1 year before the filing of this case to another person or entity, including attorneys, that the debtor consulted about debt consolidation or restructuring, seeking bankruptcy relief, or filing a bankruptcy case.

☐ None

Debtor Catalyst Prep LLC
Name

Case number (if known) 19-11236

11.1.	Who was paid or who received the transfer?	If not money, describe any property transferred	Dates	Total amount or value
	<u>Hajjar Peters LLP</u>	<u>Attorney's Fee</u>	<u>8/19/19</u>	<u>\$2,767.50</u>

Address

3144 Bee Caves Rd
Street

Austin, TX 78746-5560
City State ZIP Code

Email or website address

Who made the payment, if not debtor?

Jared Friedland

12. Self-settled trusts of which the debtor is a beneficiary

List any payments or transfers of property made by the debtor or a person acting on behalf of the debtor within 10 years before the filing of this case to a self-settled trust or similar device.

Do not include transfers already listed on this statement.

☒ None

12.1.	Name of trust or device	Describe any property transferred	Dates transfers were made	Total amount or value
	<u>Trustee</u>			

13. Transfers not already listed on this statement

List any transfers of money or other property—by sale, trade, or any other means—made by the debtor or a person acting on behalf of the debtor within 2 years before the filing of this case to another person, other than property transferred in the ordinary course of business or financial affairs. Include both outright transfers and transfers made as security. Do not include gifts or transfers previously listed on this statement.

☒ None

13.1.	Who received the transfer?	Description of property transferred or payments received or debts paid in exchange	Date transfer was made	Total amount or value
	<u>Address</u>			
	<u>Street</u>			
	<u>City State ZIP Code</u>			
	<u>Relationship to debtor</u>			

Debtor Catalyst Prep LLC
Name _____

Case number (if known) 19-11236

Part 7: Previous Locations

14. Previous addresses

List all previous addresses used by the debtor within 3 years before filing this case and the dates the addresses were used.

☒ Does not apply

Address	Dates of occupancy
14.1. _____ Street _____ _____ City State ZIP Code	From _____ To _____

Part 8: Health Care Bankruptcies

15. Health Care bankruptcies

Is the debtor primarily engaged in offering services and facilities for:

- diagnosing or treating injury, deformity, or disease, or
- providing any surgical, psychiatric, drug treatment, or obstetric care?

☒ No. Go to Part 9.

☐ Yes. Fill in the information below.

Facility name and address	Nature of the business operation, including type of services the debtor provides	If debtor provides meals and housing, number of patients in debtor's care
15.1. _____ Facility name _____ Street _____ City State ZIP Code	_____ _____ Location where patient records are maintained (if different from facility address). If electronic, identify any service provider. _____ _____	_____ How are records kept? Check all that apply: <input type="checkbox"/> Electronically <input type="checkbox"/> Paper

Part 9: Personally Identifiable Information

16. Does the debtor collect and retain personally identifiable information of customers?

☒ No.

☐ Yes. State the nature of the information collected and retained. _____

Does the debtor have a privacy policy about that information?

☐ No

☐ Yes

17. Within 6 years before filing this case, have any employees of the debtor been participants in any ERISA, 401(k), 403(b) or other pension or profit-sharing plan made available by the debtor as an employee benefit?☒ No. Go to Part 10.☐ Yes. Does the debtor serve as plan administrator?☐ No. Go to Part 10.☐ Yes. Fill in below:**Name of plan****Employer identification number of the plan**

EIN: _____

Has the plan been terminated?

☐ No☐ Yes**Part 10: Certain Financial Accounts, Safe Deposit Boxes, and Storage Units****18. Closed financial accounts**

Within 1 year before filing this case, were any financial accounts or instruments held in the debtor's name, or for the debtor's benefit, closed, sold, moved, or transferred?

Include checking, savings, money market, or other financial accounts; certificates of deposit; and shares in banks, credit unions, brokerage houses, cooperatives, associations, and other financial institutions.

☐ None

Financial institution name and address	Last 4 digits of account number	Type of account	Date account was closed, sold, moved, or transferred	Last balance before closing or transfer
18.1 _____ Name _____ Street Wells Fargo _____ City State ZIP Code	XXXX- _____	<input checked="" type="checkbox"/> Checking <input type="checkbox"/> Savings <input type="checkbox"/> Money market <input type="checkbox"/> Brokerage <input type="checkbox"/> Other _____	10/01/2019	\$0.00

19. Safe deposit boxes

List any safe deposit box or other depository for securities, cash, or other valuables the debtor now has or did have within 1 year before filing this case.

☒ None

19.1 Depository institution name and address	Names of anyone with access to it	Description of the contents	Does debtor still have it?
_____ Name _____ Street _____ City State ZIP Code	_____ _____ _____ Address _____ _____ City State ZIP Code	_____ _____ _____	<input type="checkbox"/> No <input type="checkbox"/> Yes

20. Off-premises storage

List any property kept in storage units or warehouses within 1 year before filing this case. Do not include facilities that are in a part of a building in which the debtor does business.

☒ None

Debtor Catalyst Prep LLC
Name

Case number (if known) 19-11236

20.1	Facility name and address	Names of anyone with access to it	Description of the contents	Does debtor still have it?
	Name			<input type="checkbox"/> No
	Street			<input type="checkbox"/> Yes
	City	Address		
	State			
	ZIP Code			

Part 11: Property the Debtor Holds or Controls That the Debtor Does Not Own

21. Property held for another

List any property that the debtor holds or controls that another entity owns. Include any property borrowed from, being stored for, or held in trust. Do not list leased or rented property.

☒ None

Owner's name and address	Location of the property	Description of the property	Value
Name			
Street			
City			
State			
ZIP Code			

Part 12: Details About Environmental Information

For the purpose of Part 12, the following definitions apply:

- *Environmental law* means any statute or governmental regulation that concerns pollution, contamination, or hazardous material, regardless of the medium affected (air, land, water, or any other medium).
- *Site* means any location, facility, or property, including disposal sites, that the debtor now owns, operates, or utilizes or that the debtor formerly owned, operated, or utilized.
- *Hazardous material* means anything that an environmental law defines as hazardous or toxic, or describes as a pollutant, contaminant, or a similarly harmful substance.

Report all notices, releases, and proceedings known, regardless of when they occurred

22. Has the debtor been a party in any judicial or administrative proceeding under any environmental law?

Include settlements and orders.

- ☒ No
- ☐ Yes. Provide details below.

Case title	Court or agency name and address	Nature of the case	Status of case
Case number	Name		<input type="checkbox"/> Pending
	Street		<input type="checkbox"/> On appeal
	City		<input type="checkbox"/> Concluded
	State		
	ZIP Code		

Debtor Catalyst Prep LLC
Name _____

Case number (if known) 19-11236

23. Has any governmental unit otherwise notified the debtor that the debtor may be liable or potentially liable under or in violation of an environmental law?

- ☒ No
☐ Yes. Provide details below.

Site name and address	Governmental unit name and address	Environmental law, if known	Date of notice
Name _____	Name _____	_____	_____
Street _____	Street _____	_____	
_____	_____		
City _____ State _____ ZIP Code _____	City _____ State _____ ZIP Code _____		

24. Has the debtor notified any governmental unit of any release of hazardous material?

- ☒ No
☐ Yes. Provide details below.

Site name and address	Governmental unit name and address	Environmental law, if known	Date of notice
Name _____	Name _____	_____	_____
Street _____	Street _____	_____	
_____	_____		
City _____ State _____ ZIP Code _____	City _____ State _____ ZIP Code _____		

Part 13: Details About the Debtor's Business or Connections to Any Business

25. Other businesses in which the debtor has or has had an interest

List any business for which the debtor was an owner, partner, member, or otherwise a person in control within 6 years before filing this case. Include this information even if already listed in the Schedules.

- ☒ None

Business name and address	Describe the nature of the business	Employer Identification number Do not include Social Security number or ITIN.
25.1. _____	_____	EIN: _____
Name _____		Dates business existed
Street _____		From _____ To _____

City _____ State _____ ZIP Code _____		

26. Books, records, and financial statements

26a. List all accountants and bookkeepers who maintained the debtor's books and records within 2 years before filing this case.

- ☒ None

Debtor Catalyst Prep LLC
Name _____

Case number (if known) 19-11236

Name and address

Dates of service

26a.1. _____ From _____ To _____
Name _____
Street _____

City _____ State _____ ZIP Code _____

26b. List all firms or individuals who have audited, compiled, or reviewed debtor's books of account and records or prepared a financial statement within 2 years before filing this case.

☒ None

Name and address

Dates of service

26b.1. _____ From _____ To _____
Name _____
Street _____

City _____ State _____ ZIP Code _____

26c. List all firms or individuals who were in possession of the debtor's books of account and records when this case is filed.

☒ None

Name and address

If any books of account and records are unavailable, explain why

26c.1. _____
Name _____
Street _____

City _____ State _____ ZIP Code _____

26d. List all financial institutions, creditors, and other parties, including mercantile and trade agencies, to whom the debtor issued a financial statement within 2 years before filing this case.

☒ None

Name and address

26d.1. _____
Name _____
Street _____

City _____ State _____ ZIP Code _____

Debtor Catalyst Prep LLC
Name _____

Case number (if known) 19-11236

27. Inventories

Have any inventories of the debtor's property been taken within 2 years before filing this case?

☒ No

☐ Yes. Give the details about the two most recent inventories.

Name of the person who supervised the taking of the inventory

Date of
inventory

The dollar amount and basis (cost, market, or
other basis) of each inventory

Name and address of the person who has possession of inventory records

27.1.

Name

Street

City

State

ZIP Code

28. List the debtor's officers, directors, managing members, general partners, members in control, controlling shareholders, or other people in control of the debtor at the time of the filing of this case.

Name

Address

Position and nature of any interest

% of interest, if any

0.00%

29. Within 1 year before the filing of this case, did the debtor have officers, directors, managing members, general partners, members in control of the debtor, or shareholders in control of the debtor who no longer hold these positions?

☒ No

☐ Yes. Identify below.

Name

Address

Position and nature of any
interest

Period during which
position or interest was held

From _____
To _____

30. Payments, distributions, or withdrawals credited or given to insiders

Within 1 year before filing this case, did the debtor provide an insider with value in any form, including salary, other compensation, draws, bonuses, loans, credits on loans, stock redemptions, and options exercised?

☒ No

☐ Yes. Identify below.

Debtor Catalyst Prep LLC
Name _____

Case number (if known) 19-11236

Name and address of recipient

**Amount of money or
description and value of
property**

Dates

**Reason for providing
the value**

30.1.

Name

Street

City State ZIP Code

Relationship to debtor

31. Within 6 years before filing this case, has the debtor been a member of any consolidated group for tax purposes?

☒ No

☐ Yes. Identify below.

Name of the parent corporation

Employer Identification number of the parent corporation

EIN: ____ - ____ - ____ - ____ - ____

32. Within 6 years before filing this case, has the debtor as an employer been responsible for contributing to a pension fund?

☒ No

☐ Yes. Identify below.

Name of the pension fund

Employer Identification number of the pension fund

EIN: ____ - ____ - ____ - ____ - ____

Part 14: Signature and Declaration

Debtor Catalyst Prep LLC
Name

Case number (if known) 19-11236

WARNING -- Bankruptcy fraud is a serious crime. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$500,000 or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

I have examined the information in this *Statement of Financial Affairs* and any attachments and have a reasonable belief that the information is true and correct.

I declare under penalty of perjury that the foregoing is true and correct.

Executed on 10/25/2019
MM/ DD/ YYYY

X /s/ Jared Friedland
Signature of individual signing on behalf of the debtor

Position or relationship to debtor
CEO

Printed name Jared Friedland

Are additional pages to *Statement of Financial Affairs for Non-Individuals Filing for Bankruptcy* (Official Form 207) attached?

☒ No
☐ Yes

United States Bankruptcy Court

Western District of Texas

In re

Catalyst Prep LLC

Debtor(s)Case No. 19-11236Chapter 7**DISCLOSURE OF COMPENSATION OF ATTORNEY FOR DEBTOR**

1. Pursuant to 11 U.S.C. § 329(a) and Fed. Bankr. P. 2016(b), I certify that I am the attorney for the above named debtor(s) and that compensation paid to me within one year before the filing of the petition in bankruptcy, or agreed to be paid to me, for services rendered or to be rendered on behalf of the debtor(s) in contemplation of or in connection with the bankruptcy case is as follows:

For legal services, I have agreed to accept	\$2,767.50
Prior to the filing of this statement I have received	\$2,767.50
Balance Due	\$0.00

2. The source of the compensation to be paid to me was:

☐ Debtor☒ Other (specify) Jared Friedland

3. The source of compensation to be paid to me is:

☐ Debtor☒ Other (specify) Jared Friedland

4. ☒ I have not agreed to share the above-disclosed compensation with any other person unless they are members and associates of my law firm.

☐ I have agreed to share the above-disclosed compensation with another person or persons who are not members or associates of my law firm. A copy of the agreement, together with a list of the names of the people sharing in the compensation, is attached.

5. In return for the above-disclosed fee, I have agreed to render legal service for all aspects of the bankruptcy case, including:

- a. Analysis of the debtor's financial situation, and rendering advice to the debtor in determining whether to file a petition in bankruptcy;
- b. Representation of the debtor at the meeting of creditors and confirmation hearing, and any adjourned hearings thereof;

6. By agreement with the debtor(s), the above-disclosed fee does not include the following services:

Any Post-petition activities will be billed hourly

CERTIFICATION

I certify that the foregoing is a complete statement of any agreement or arrangement for payment to me for representation of the debtor(s) in this bankruptcy proceeding.

10/25/2019*Date*/s/ Ron Satija*Signature of Attorney*

Ron Satija
Bar Number: 24039158
Hajjar Peters LLP
3144 Bee Caves Rd
Austin, TX 78746-5560
Phone: (512) 637-4956

Hajjar Peters LLP*Name of law firm*

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8x8

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Denton Convention Center
Kaylin Homan and Todd Muilenburg

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**IN THE UNITED STATES BANKRUPTCY COURT
WESTERN DISTRICT OF TEXAS
AUSTIN DIVISION**

IN RE: **Catalyst Prep LLC**

CASE NO 19-11236

CHAPTER 7

VERIFICATION OF CREDITOR MATRIX

The above named Debtor hereby verifies that the attached list of creditors is true and correct to the best of his/her knowledge.

Date 10/25/2019 Signature /s/ Jared Friedland
Jared Friedland, CEO